

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	2-1-01
FORMALITY REVIEW	Am	896	02/15/01
RESPONSE FORMALITY REVIEW	SG	1077	4/30/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
1	01/15/01
2	02/02/01
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If more than 150 claims or 10 actions  
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